

LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.
Registrations expire on January 31 unless a renewal is
submitted between December 1 and January 31.

Instructions

- Print in ink or type.
- Complete form, have it notarized and return with \$10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (504) 922-1400.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Renewals must be submitted between December 1 and January 31.
- Complete employer verification form(s) for each employer and each person you represent as listed below.

1. NAME Sickels Linda S.
Last First MI
2. BUSINESS PHONE (214) 589-8187
Area Code and Phone Number
3. BUSINESS ADDRESS 2525 Stemmons Freeway Dallas TX 75207
Street and No. City State Zip
4. EMPLOYER Trinity Industries, Inc.
5. EMPLOYER'S ADDRESS 2525 Stemmons Freeway Dallas TX 75207
Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby. R.S. 24:53(C) REQUIRES THAT A VERIFICATION FORM BE SIGNED BY EACH PERSON YOU REPRESENT OR WHO EMPLOYS YOU. THOSE FORMS MUST MATCH THIS LISTING.

1. Name Trinity Industries, Inc.
Address 2525 Stemmons Freeway, Dallas, TX 75207
Business or purpose Diversified industrial company
Does this person pay you? YES
If No, who pays you? _____
2. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____

390
Lobbyist's Registration Number

FOR OFFICE USE ONLY

Postmark Date: 1-17-00

Reg
11-26039157
\$10.00
RSD

1000477

LOBBYING REGISTRATION FORM

390
Lobbyist's Registration Number

3. Name _____
 Address _____
 Business or purpose _____
 Does this person pay you? _____
 If No, who pays you? _____
4. Name _____
 Address _____
 Business or purpose _____
 Does this person pay you? _____
 If No, who pays you? _____
5. Name _____
 Address _____
 Business or purpose _____
 Does this person pay you? _____
 If No, who pays you? _____

State of Texas
 Parish of Dallas

Before me, the undersigned authority, personally came and appeared Patricia A. Thiers, who, after being duly sworn by me, did declare and acknowledge to me that the above statements are true and correct.

Patricia A. Thiers
 Signature of Lobbyist

Sworn to and subscribed before me on this 11th day of January, 19 2004

Patricia A. Thiers
 Notary Public

Rev. 5/96

